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APPLICANTS Joan T. Odell, Unionville, PA; <i>MAT</i>				
** CONTINUING DATA ***** This application is a CON of 10/021,811 12/14/2001 ABN which is a DIV of 09/452,244 12/01/1999 ABN which claims benefit of 60/110,609 12/02/1998 <i>MAT</i>				
** FOREIGN APPLICATIONS ***** <i>none, MAT</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/18/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>Red</i> Examiner's Signature Initials		STATE OR COUNTRY PA	SHEETS DRAWING 5	TOTAL CLAIMS 16
		INDEPENDENT CLAIMS 6		
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FILING FEE RECEIVED 1282	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	